

# THE MEDICAL AND SURGICAL REPORTER.

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## ORIGINAL DEPARTMENT.

### Communications.

#### THE MALIGNANT INFLUENCES OF THE UTERUS.

Illustrated by Two Cases.

By JOHN H. GRISCOM, M. D.,

Physician of the New York Hospital.

The above nosological designation may appear strange to most professional men, who will look in vain for its definition in the medical dictionary, but a description of the cases is relied upon to justify its use. The extensive and potent sympathetic relations of the healthy uterus, and the disturbances of other organs produced by its various pathological conditions, are well known. By the cases now to be described, the powerful influences derived from its simple *mechanical* derangements and displacements, and their complete obviation by the restoration of the organ to its normal status, are clearly demonstrated.

*Case 1st.* In the spring of 1861, I was called to see a lady, about 30 years of age, several years married, and the mother of a child, 9 years old, but had not been pregnant since its birth. She had been a long time in delicate health, and was now troubled with a cough, which she regarded as consumptive. I found her in bed, much prostrated in strength, with considerable nervous excitability, and assured, in her own mind, that she was in a critical condition. My attention being directed, by her fear of phthisis, to her chest, a thorough auscultation failed to discover any evidence whatever of pulmonary disease, nor did the pulse indicate any tendency of the kind. Upon careful general examination, no symptoms of constitutional disorder of any kind could be discovered, except what pertained to the nervous system, nor was there any cause for this discernible upon general observation. In the absence of any apparent cause for the debility, cough, and other symptoms of deranged health, the thought occurred to me, that possibly there might be some derangement of the sexual

organs, from sympathy with which other functions were disturbed.

After considerable hesitation on her part, derived from the absence of all feeling of local disturbance in that quarter, and disbelief in the possibility of its existence, she was prevailed upon to submit to a digito-vaginal examination. This immediately revealed a complete *retroflexion* of the uterus, the fundus being drawn nearly on a level with the os, and pressing back upon the rectum, while the neck was thrust forward toward the pubis. Although indisposed to regard this displacement as the only source of the long-continued disturbance of health, especially of the cough and general prostration, the restoration of the organ to its normal position was a necessity, and was soon effected by the introduction of SIMPSON'S sound, aided by pressure upward of the fundus by the finger in the vagina. This being done, a horse-shoe pessary was introduced in such a manner that one end occupied the space behind the cervix, the other end resting upon the lower and anterior portion of the vagina, near the pubis, thus aiding to keep the organ in its normal position, the confirmation of its restoration being dependent upon time and the avoidance of any jarring motion of the body.

That this simple physical derangement of the uterus was the cause of all the distressing symptoms, including the cough, which was without expectation, was made manifest by their entire disappearance from almost the very day when the organ was relieved from its mal position, and that it was the cause of her sterility for so long a time, although the menstrual menses had been unchecked, was proved by her giving birth to a robust infant within a year from the date of the womb's restoration.

*Case 2d* is an equally striking illustration of the profound and complex sympathetic influences of the uterus, though exerted upon an entirely different class of functions. A lady, of 22 years, a bride of about four months, who had very recently arrived from her paternal home in Ireland, sought my advice, in November last, for a most distressing attack of dyspepsia. The history of the case revealed the fact, that before

the age of 17, she had enjoyed robust health, and at that age her menses commenced, and continued regularly for about a year; since which time she has been subject to very irregular and painful menstruation, the function being frequently suspended for from two to four months at a time. For two or three years past, other distressing disorders have also appeared, viz., dyspepsia, constipation, nausea, and vomiting, which occur at frequent intervals, and continuing several weeks at a time. The most eminent practitioners of her native country have been consulted for her relief, but, as I was informed, without any beneficial result.

Regarding the case as one of general derangement of the chylopoietic viscera, with special functional disturbances, every remedy indicated by its symptoms was given a fair trial, but the dyspeptic suffering continued unabated. Its protracted severity became so great as at length to lead to the suspicion of subacute gastritis, the evidence of which diagnosis became sufficiently strong to justify counter-irritation, first by Croton oil, and this failing to mitigate it, then by cantharidal vesication over the epigastrium. No relief followed either of these applications.

Finally, on taking into consideration the coincidence of the amenorrhoea and the constipation, with the dyspepsia, the absence of any distinct cause of either, and the total failure of all the means which, in my experience, had hitherto proved successful in cases apparently similar, the suspicion arose that the uterus itself might be the source of all the trouble. Accordingly, an examination per vaginam was made, and as in the former case, a complete retroflexion was ascertained to exist. In a few minutes, it was by the same means restored to its normal state and so maintained, the recumbent position of body being enjoined for at least a week, in order to avoid all danger of a return of the flexion.

In this, as in the former case, the good result was equally prompt and perfect. Every evidence of gastric derangement immediately disappeared, together with the constipation, and though more than four months have now elapsed since the operation, not one of the symptoms which had rendered the past four years of the patient's life a period of severe and almost continuous suffering, has returned. Daily defecations, punctual and painless menstruation, and a good appetite, without the slightest gastric disturbance, combine to demonstrate how dependent upon each other, for their healthy condition, are the various parts of the animal structure, and how closely they are correlated by that mysterious influence which

has its centre and origin in the brain and spinal cord, and pervades every fibre of the body.

As to the cause of these organic derangements of the uterus, whereby its nervous connections and associations undergo so great disturbance and produce these varied sympathetic phenomena;—in the first of these two cases, it was impossible to trace the difficulty to any demonstrable circumstance. It probably occurred soon after parturition several years before, and was due to the non-restoration of the muscular and ligamentous tissues of the organ to their natural contractile tone, whereby it was unable to resist the pressure of the superincumbent abdominal viscera, its own weight serving to continue the flexion, self-rectification being impossible.

In the second case, the cause of the difficulty was more directly traceable to an unusual and severe exertion of the body. About the age of eighteen, the patient was attacked by a horned brute, to escape from which she was compelled to leap a fence. Although no apparent injury resulted therefrom at the time, the irregular menstruation soon after commenced, and was speedily followed by the symptoms of dyspepsia, constipation, and nausea, which occurred at frequent intervals until she came under my care. She was otherwise in good health, and in the frequent practice of horse-back riding, which, though a very agreeable exercise, doubtless helped to maintain the uterus in its deranged attitude.

#### Luxation of Neck Reduced.

In the *Paris Gazette Hebdomadaire de Médecine*, is described a case of lateral luxation of the fifth cervical vertebra on the sixth, reduced successfully thirty-six hours after the injury. The patient was a woman who fell on her head. The upper extremities were paralyzed and the head fixed to one side, whilst the lower limbs were not affected. The surgeon, Dr. LEON PARISSOR, of Nantes, seated her on the floor, and whilst the body and shoulders were firmly held by assistants, took his station behind her, placed his hands beneath the jaws, with his thumbs pressing on the mastoid processes, extended the neck gently, and then by a sudden movement replaced the bones, which resumed their position with an audible snap. The paralysis passed off gradually, and the patient was well on the seventeenth day.

**CHLORINE IN STINKING BREATH.** Dr. CLEMENS states that during the last thirty years he has constantly found the administration of numerous small doses of weak chlorine water a certain remedy for this distressing inconvenience,

## Medical Societies.

### AMERICAN MEDICAL ASSOCIATION.

#### SEVENTEENTH ANNUAL SESSION.

(Continued from page 389.)

#### SECOND DAY—Wednesday, May 2, 1866.

The Association was called to order at 9 A. M., the President in the chair.

Dr. Davis, Illinois, stated that he had received a report on Meteorology, etc., from Dr. R. C. Hamill, Illinois, and had presented it to the section on Meteorology, Epidemics, etc.

Dr. Cox, chairman of Committee of Arrangements, reported that the Pennsylvania Central, the Northern Central, and the Baltimore and Ohio Railroads, had agreed to pass delegates home free, on the certificate of the Permanent Secretary, and that the Philadelphia, Wilmington, and Baltimore Railroad had issued passes, to be signed by the same officer, at a reduced fare.

He also presented as members by invitation, Drs. John A. Reed, W. Whitridge, and L. M. Eastman, of Baltimore, and Peter Parker, of China, who were unanimously elected.

On motion of Dr. Davis, the order of business was suspended, to allow of the report of the Committee of Publication.

The report was read, accounting for the delay in the publication, and showing how many copies of the Transactions had been sold.

After some discussion, it was, on motion,

*Resolved*, That the Committee of Publication be required to adhere strictly to the laws for their government, in order to avoid delay in future.

Dr. C. Wister, Treasurer, read his report, showing the balance due the printer as \$404 52; that the members did not come forward and pay their assessments, and but half of those present at last session had paid the additional \$2 called for.

The report was accepted and referred to the Committee of Publication.

The order of business was then resumed, and on motion of Dr. Davis, a recess of fifteen minutes was taken, to enable the delegates from the various States to appoint their members of the Committee on Nominations.

At the expiration of the recess, the Secretary read the following names as constituting the Committee:

Maine, J. C. Weston; New Hampshire, Josiah C. Eastman; Vermont, W. McCollom; Massachusetts, J. R. Bronson; Rhode Island, D. King; Connecticut, W. Woodruff; New York, Jos. C. Hutchinson; New Jersey, W. Pierson, Jr.; Pennsylvania, John L. Atlee; Delaware, H. F. Askew; Maryland, James J. Corkrill; District of Columbia, Grafton Tyler; Ohio, G. Fries; Michigan, C. M. Stockwell; Wisconsin, H. Van Deusen; Illinois, N. S. Davis; Indiana, W. Lockhart; Iowa, J. M. Witherwax; Tennessee, T. A. Atkinson; Georgia, W. M. Chartres; Missouri, M. A. Pallen; Alabama, N. Bozeman; United

States Army, Josiah Simpson; United States Navy, N. Pinckney.

Dr. W. Hooker, of Connecticut, presented the following resolution, which was unanimously adopted:

*Resolved*, That no report or other paper shall be presented to this Association, unless it be so prepared that it can be put at once into the hands of the Permanent Secretary, to be transmitted to the Committee of Publication.

On motion of C. Wister, Pennsylvania, it was

*Resolved*, That Drs. Grafton Tyler, W. P. Johnson, and J. M. Toner, be a committee to procure a room in the Smithsonian Institution for the preservation of the archives of the Association.

The Committee on Medical Education having no report to offer, Dr. J. F. Hibberd, Indiana, offered a preamble and resolutions, that, as certain of the medical colleges of the West had held a convention and agreed to extend the lecture term to six months, provided that the other colleges of the United States did the same, therefore this Association adopt this as their sentiment, and urge the others to join in this movement.

On motion of Dr. M. K. Taylor, Iowa, it was deferred, to be considered in Committee of the Whole, at 11 A. M., on Thursday.

Dr. C. A. Lee, New York, chairman of Committee on Medical Literature, commenced to read his report, and gave way, at 11 A. M., for the lecture of Dr. Brown-Séquard, on the *Treatment of Functional and Organic Diseases of the Nerves*.

After the conclusion of the lecture, on motion of Dr. Raphael, New York, the thanks of the Association were tendered to Dr. Brown-Séquard, for his interesting, able, and eminently practical lecture, and he was requested to furnish an abstract for publication.

Dr. Lee then resumed the reading of his report, when, on motion of Dr. Toner, the further reading was dispensed with, and the paper referred to the Committee of Publication.

Dr. S. D. Gross, Pennsylvania, chairman of the Committee on Medical Education, announced that no report had been prepared, and asked that the committee be discharged, which request was granted.

Dr. Ellsworth Eliot, New York, Secretary of the Committee on Prize Essays, presented the report of that committee:

That the first prize of one hundred dollars had been awarded to Dr. W. F. Thoms, New York, for a paper on *Health in Country and Cities*, illustrated by tables of the death-rates, sickness-rates, etc., in countries and cities.

The second to Dr. S. R. Percy, New York, for a paper on *Digitaline, its Chemical, Physiological, and Therapeutical Action*.

Another paper of undoubted value had been received by the committee, on *Angular Curvature of the Spine*, but the author, through inadvertence, had given his name to the chairman of the committee, thus depriving him of the right to compete for a prize. The committee, therefore, resolved to present this paper to the Association, for reference to the section on Surgery, that its claims to publication might be considered.



The committee also suggested an earlier organization of the Committee on Prize Essays in future, and the issuing of a circular inviting competition, with the hope of thus securing a larger number of papers.

On motion, the report was received and adopted, and the paper on *Angular Curvature of the Spine* was referred to the section on Surgery.

The report of the Committee on Medical Ethics having been offered, it was made the special business at 9½ A. M., on Thursday.

Dr. Marsden, of Canada, having been announced as desirous of making some remarks on cholera, it was, on motion, agreed that he should follow immediately after the report on Medical Ethics.

Communications were offered by Dr. Cohen, Pennsylvania, on *Paralysis of the Vocal Chords, etc.*, which was referred to the section on Surgery; by H. R. Storer, Massachusetts, on *Clamp Shields*, an instrument designed to lessen the dangers of extirpation of the uterus by the abdominal section, which was similarly referred.

Dr. N. Bozeman, Alabama, was introduced to the Association, and on motion, was made a member of the Committee on Nominations from Alabama.

Dr. H. F. Askew, Delaware, offered the following, which was unanimously adopted:

*Whereas*, We have heard, with profound regret, of the death of our deservedly esteemed friend and associate, JAMES COUPER, M. D., of Delaware, late Vice-President and one of the founders of the American Medical Association; *and whereas*, we desire to express our high appreciation of his worth as a man, and valuable and untiring energy in the cause of medical science; mild, modest, and unassuming, of devoted piety, he was firm, constant, and reliable; a strict adherent to the ethics of his profession, he occupied a front rank, and died beloved, respected, and lamented by all who knew him.

*Resolved*, That in the death of Dr. COUPER we have lost a friend and brother, and that we sincerely and deeply condole with his sorrow-stricken widow and family, and that the Secretary be authorized to forward a certified copy of these resolutions to his family.

Dr. Toner, District of Columbia, offered the following, which was referred to the Committee of Publication.

*Resolved*, That, instead of yearly reprinting the list of members of the American Medical Association with the Transactions of the same, the Secretary be instructed to prepare and have printed, in pamphlet form, a triennial alphabetical catalogue, containing the constitution of the Association, and a list of members, with their full names, designating their residence, the year of their admission, arrearages of yearly dues, the offices they may have held in this body, and in case of death or resignation, the year, and distribute the same among the contributing members.

Dr. J. C. Hughes, Iowa, presented a paper on *Lithotomy*, which was referred to section on Surgery.

Dr. M. K. Taylor, Iowa, offered a resolution for the appointment by the President of a mem-

ber from each State, to memorialize Congress for an appropriation to publish the medical and surgical history of the war, as desired by the Surgeon-General of the United States, which was unanimously adopted, and the President requested to announce the committee at the opening of the session on Thursday.

On motion, adjourned until Thursday, 9 A. M.

### THIRD DAY.—Thursday, May 3d.

The Association was called to order at 9, A. M., by the President.

The following were announced as constituting the Committee on Memorial to Congress, etc.:

N. S. Davis, Illinois; N. P. Monroe, Maine; J. C. Eastman, New Hampshire; H. B. Holton, Vermont; J. P. Ordway, Massachusetts; Worthington Hooker, Connecticut; Theoph. C. Dunn, Rhode Island; James Anderson, New York; Ezra M. Hunt, New Jersey; Wilson Jewell, Pennsylvania; Henry F. Askew, Delaware; C. C. Cox, Maryland; J. M. Toner, District of Columbia; Wm. M. Chartres, Georgia; Wm. K. Bowling, Tennessee; S. O. Almy, Ohio; J. F. Hibberd, Indiana; Montrose A. Pallen, Missouri; Cyrus M. Stockwell, Michigan; M. K. Taylor, Iowa; Harmon Van Dusen, Wisconsin; A. B. Cabanis, Mississippi; Josiah Simpson, U. S. A., Ninian Pinkney, U. S. N.

Dr. Cox, Chairman of Committee on Necrology, reported progress, and on motion of Dr. Hibberd, was granted permission to send his report when completed to the Committee of Publication.

Dr. A. C. Post, New York, offered the following resolution, which was unanimously adopted:

*Resolved*, That the Association has heard with sincere regret of the death of its late distinguished member, JOSEPH M. SMITH, M. D., of New York.

*Resolved*, That we cherish his memory as that of a learned and skilful cultivator of medical science, an able and successful teacher and writer, an upright and honorable man, and a patriotic and public spirited citizen.

*Resolved*, That the Secretary communicate to the family of deceased an expression of our sympathy with them in their bereavement.

The Permanent Secretary read the following communication from Dr. James S. King, Natchez, Mississippi:

*Office, Surgeon-in-Charge, Mississippi State Hospital, Natchez, Mississippi, April 14th, 1866.*

I propose, with the assistance of the medical profession, to collect the mortuary statistics of all the principal cities and towns throughout the United States, together with such topographical and meteorological accounts as may be of interest to the medical profession.

I respectfully request the members of the American Medical Association to forward me the mortuary reports of their several cities and towns.

As far as possible I wish the reports to include the sixteen years from 1850 to 1865 inclusive, but where the records for that number of years are not complete, forward me the statistics for such time as reliable data can be obtained.

Respectfully submitted,

J. STEBBINS KING, M. D.

The Permanent Secretary read a communication from the Dubuque (Iowa) Medical Society, requesting that the name of Dr. Asa Horr be stricken from the roll, which, on motion of Dr. Jewell, Pennsylvania, was granted.

Dr. Holton, Vermont, announced that Dr. H. R. Storer, of Massachusetts, to whom had been awarded the prize for an essay last year, had presented the same to the Association.

Dr. Mayburry, Pennsylvania, in behalf of the Committee of Publication, to whom had been referred the resolution of Dr. Toner, reported the following as a substitute, which was unanimously adopted:

*Resolved*, That instead of yearly reprinting the lists of members of the American Medical Association, the Committee of Publication be instructed to prepare and print in the Transactions, an alphabetical catalogue triennially, containing a complete list of the permanent members, with their names in full, designating their residences, the year of their admission, the offices they may have held in the Association, and in case of death or resignation, the date thereof.

Dr. Mayburry also presented a communication from the Montgomery county (Pennsylvania) Medical Society, which was referred to the Committee on Medical Ethics.

*Whereas*, Medical organizations, such as National, State and County Societies, are believed to be absolutely necessary to preserve the honor of the medical profession, and to keep alive social and fraternal feelings among the members thereof, as well as an important means of promoting medical knowledge, and elevating the character of the profession; therefore,

*Resolved*, That it is with sincere regret that we, the members of the Montgomery County Medical Society of Pennsylvania, learn, that some honorable members of the faculties of our Medical Colleges, in Philadelphia and elsewhere, have kept aloof from the County Societies, on which rest both State and National organizations, thus ranging themselves on the side of those whose unprofessional conduct, or low standard of medical attainment, or disregard of medical etiquette, prohibits them from membership in those Societies.

*Resolved*, That as graduates of the University of Pennsylvania, Jefferson Medical College, and Pennsylvania Medical College, we have a high regard for the teachers of these institutions, and feel that they owe it to the Profession, and to our alma matres, to give their hearty support to medical organizations in general, and especially to the County and State Medical Societies.

*Resolved*, That although Colleges are entitled to representation in the American Medical Association, by one, or more, of their professors, we are decidedly opposed to any college, or any other medical organization, being represented by a Professor who is not a member of a County Society.

*Resolved*, That the Corresponding Secretary of this Society be instructed to report these proceedings to the Philadelphia County Medical Society, and that our delegates be charged to lay them before the American Medical Association at the coming meeting to be held at Baltimore,

on the 1st day of May next, as well as before the Medical Society of the State of Pennsylvania, at its next meeting to be held at Kingston, in Luzerne county, on the 13th day of June ensuing.

WILLIAM P. ROBINSON, *President*.

E. SMYSER, M. D., *Recording Secretary*.

Montgomery County Medical Society,  
State of Pennsylvania.

Minority and majority reports of the Committee on Medical Ethics on the subject of Specialties were presented, and much discussion had, during which the hour of 11 arrived, and the matter was postponed in order to allow of the special business, the remarks of Dr. Marsden, of Canada, on Cholera.

Dr. Marsden then gave at great length his views and plans for Quarantine as a preventative of Cholera.

He stated his belief in the communicability of cholera, and the necessity of the most rigid quarantine. He had witnessed the first case that ever occurred on the American Continent, and since that time had given much attention to the study of the disease. He was now firmly convinced that every case of cholera could be traced to infection, and that the proper soil for the propagation of the disease was to be found in filth, and the neglect of sanitary measures. He believed that all clothing of patients suffering from the disease should be destroyed, thus preventing the spread of the disease. He believed that isolation would prevent the appearance of the disease in any community, and related an instance in point which had made such a strong impression upon him that he was caused to think first of his plan of quarantine. It seems that a school-mistress in a locality where cholera threatened to make its appearance, consulted the Doctor on the best course to pursue. He suggested that as soon as the disease should appear in the city she should isolate the school from the rest of the town by closing the gates and doors. This was done, and not a single case of cholera occurred within the walls. He next gave the members a detailed account of his system of quarantine:

1. The Cholera Quarantine Station shall be divided into three separate and distinct sections or departments.

2. Each of these sections or departments shall be isolated and separated from one another, by a cordon or portion of neutral ground, of not less than one hundred feet wide.

a. One of these sections or departments shall be appropriated to the use of the sick, and shall be the Hospital Department.

b. The next, or central section or department, shall be devoted to the use of passengers not having had cholera, but from infected vessels.

c. And the third, or healthy section or department, shall be appropriated to the use of the healthy, who have been removed from the central department, after having performed quarantine there.

A. In the first section or department, there shall be three separate and distinct hospitals, besides a convalescent shed or hospital.

a. The one for confirmed cases of cholera to be called the CHOLERA HOSPITAL.

b. Another for cases of choleraic diarrhoea, or other premonitory symptoms of cholera, to be called the **HOSPITAL FOR CHOLERINE**.

c. The third, for all other diseases, not cholera, or cholerine, but coming from on board infected vessels, or vessels having had cases of cholera on board, to be called the **GENERAL HOSPITAL**.

B. The next, or central section or department, shall be the primary quarantine department, and shall be appropriated to all persons who are not sick, but come from vessels having had cholera on board, and wherein every case on landing shall undergo inspection, washing, cleansing and purifying both of persons and personal effects. There a quarantine of four days shall be performed, at the end of which period of time all such persons as continue in sound health, shall be removed to the Final Quarantine Department, and any that may fall sick, or be threatened with sickness during the four days of probation, shall, as soon as detected, be removed to the proper hospital, in the Hospital Department. There also, the healthy inmates shall be removed daily to a new locality, thus occupying four different habitations during their sojourn.

C. The third, or healthy department, shall be the Final Department, and shall be for all cases coming from the Primary Quarantine Department, after having been cleansed, washed and disinfected, and after having undergone the *four days* quarantine; and here a further quarantine of *six days* shall be performed (excepting cases coming from the convalescent hospital or shed, hereinafter provided for), making in all *ten days* of quarantine, when all persons continuing healthy shall be discharged from quarantine, and be removed from the station. If any premonitory symptoms or other cases of sickness occur in this department, during the six days of quarantine, they shall, as soon as discovered, be removed to the proper hospital, in the Hospital Department.

No communication shall take place with the Hospital Department, except through the central or Primary Quarantine Department, for which purpose a passage, unfrequented by the persons undergoing quarantine, shall be set apart and reserved.

On motion of Dr. Lee, New York, the thanks of the Association were tendered Dr. Marsden, for his interesting and practical remarks.

On motion of Dr. Davis, Illinois, the order of business was suspended to hear the report of the Committee of Nominations.

The Committee of Nominations reported as follows:

Place of meeting—*Cincinnati*. Time—*May*.

Officers for 1867.

President—H. F. ASKEW, of Delaware.

Vice-Presidents—1st. W. K. BOWLING, of Tennessee. 2d. J. C. HUGHES, of Iowa. 3d. H. I. BOWDITCH, of Massachusetts. 4th. THOMAS C. BRINSMADE, of New York.

Permanent Secretary—WILLIAM B. ATKINSON, of Pennsylvania.

Assistant Secretary—W. W. DAWSON, of Ohio.

Treasurer—CASPAR WISTER, of Pennsylvania.

Committee of Arrangements.—John A. Mur-

phy, James Graham, R. R. McIlvaine, J. P. Walker, — Unsicker, Wm. T. Brown, Wm. B. Davis, all of Cincinnati.

Committee on Medical Education—S. D. Gross, D. Francis Condie, John Bell, Pennsylvania, H. J. Bigelow, Massachusetts, Charles A. Pope, Missouri.

Committee on Prize Essays—Francis Donelson, Josiah Simpson, U. S. A., C. C. Cox, Edward Warren, H. C. Van Bibber, all of Baltimore.

Committee on Publication—(Re-elected.) F. G. Smith, C. Wister, W. B. Atkinson, W. Maybury, Pennsylvania, H. F. Askew, Delaware, Gerard E. Morgan, Maryland.

Committee on Medical Literature—Alfred C. Post, Jas. Anderson, H. D. Noyes, T. G. Thomas, Stephen Smith, all of New York.

Committee on American Medical Necrology continued, with the following—Dr. Wood, of Delaware, substitute for Dr. Couper, John L. Callender, of Tennessee, in place of W. K. Bowling, John Blane, in place of Wm. Pierson, of New Jersey, E. S. F. Arnold, in place of J. H. Griecom, New York. Added—R. D. Arnold, Georgia, A. Lopez, of Alabama, Greenville Dowell, of Texas.

Committee on Climatology and Epidemics—Continued, with the addition of Uriah Harris, of Georgia, Henry Jones, in place of C. L. Allen, of Vermont, George Engelman, of Missouri, R. Miller, of Alabama, E. D. Fenner, of Louisiana, Greenville Dowell, of Texas.

All committees on special subjects to be selected by the sections to which the subjects relate.

N. S. DAVIS,

Chairman Nominating Committee.

On motion of Dr. Ordway, Massachusetts, the report was accepted, and unanimously adopted.

On motion, the Association resolved itself into a Committee of the Whole, with Dr. Hibberd, Indiana, in the chair, to discuss the subject of extending the college terms.

The Committee of the Whole having risen, the President resumed the chair, and Dr. Hibberd, chairman of that committee, reported that the subject of lengthening our college terms had been most thoroughly discussed, and there had been adopted the following resolution, offered by Dr. Davis, Illinois:

*Resolved*, That the Association most earnestly request the medical colleges of the country to hold a convention for thoroughly revising the whole system of medical college instruction, for the purpose of establishing more uniformity of time and a more systematic course of instruction for the whole.

On motion, the resolution adopted by the Committee of the Whole was unanimously adopted by the Association.

On motion, a committee of three was appointed to carry out this resolution, with Dr. Davis, Illinois, as chairman.

Committee—Drs. N. S. Davis, Illinois, Worthington Hooker, Connecticut, and Geo. C. Shattuck, Massachusetts.

On motion, the committee was increased to



five, and Dr. M. B. Wright, Ohio, and Samuel D. Gross, Pennsylvania, were added.

Dr. Cox read the report of the Committee on Rank of Medical Corps in United States Army, which was referred to the Committee of Publication.

Dr. Cox offered the following resolution, which was unanimously adopted:

*Resolved*, That the President of this Association bring before the notice of the Military Committees of both Houses of Congress, at as early period as possible, the present status of medical men in the military service of the United States, and urge upon them, that in the army medical bills under consideration of Congress, the interests of the medical profession shall be so regarded that the medical staffs in the service shall, numerically considered, receive the same rank and command as officers in other staffs of the army are justly entitled to.

On motion, a committee from this vicinity was appointed to carry out the resolution, the President to act as chairman.

*Committee*—Drs. D. H. Storer, Massachusetts, C. C. Cox, T. Antisell, W. P. Johnston, Maryland, Chas. Allen, District of Columbia.

Dr. Cox, from the Committee of Arrangements, offered the following as members by invitation, who were unanimously elected—Drs. W. Stump Forward, W. H. Stump, and Joseph L. Chaplain, Delaware, and W. D. Stewart, of Virginia.

Dr. Cox moved that a committee be appointed to report on the Treatment of Fractures of the Spine, and that Dr. C. E. Brown-Séquard be chairman thereof.

The matter was referred to the section on Surgery, with instructions to make the appointment.

On motion, Drs. A. C. Post, New York, Thomas Antisell, District of Columbia, and John L. Atlee, Pennsylvania, were added to complete the Committee on Medical Ethics.

On motion, the reports of the Committee on Medical Ethics were taken up for discussion.

The reports were read, and on motion of Dr. Toner, the resolution attached to the minority report, to postpone indefinitely the further consideration of the subject of Specialties, was omitted from the report, and both reports were adopted.

On motion, this action was reconsidered, and the resolution re-annexed to the minority report, and both reports were then referred to the Committee of Publication.

Dr. J. S. Cohen, Pennsylvania, moved that the subject of Specialties be recommended as the special order of business to be considered at 10 A. M., on the second day of the meeting in 1867, and that meanwhile the various local societies sending delegates to this Association be requested to discuss the subject at their meetings.

Pending which, Dr. Julius Homberger, of N. Y., made a personal explanation relative to the subject. The previous question was called for and sustained, and the motion of Dr. Cohen was adopted.

On motion of Dr. Sayre, New York, it was agreed to hold an adjourned meeting at 5 P. M., to discuss the subject of cholera.

Communications from Dr. McGill, U. S. A., on

Periosteal Flap in Amputations in Continuity, and Dr. L. Elsberg, New York, on the Present Means for Diagnosis of Diseases of the Lungs, were offered and referred to the section on Surgery.

The Association then adjourned until 5 P. M.

### THIRD DAY.—Afternoon Session, May 3d.

At 5, P. M., according to previous adjournment the Association met, and after being called to order, resolved itself into a Committee of the Whole, choosing Dr. Davis as chairman.

The subject for discussion, as formerly announced, was

### CHOLERA.

Dr. Sayre, of N. Y., opened the discussion. He considered that the disease could not reach here unless it was brought here; that it could not be generated here. It multiplies its ravages when filth and uncleanness abound, and is generated in a sandy, level country, beneath a temperature of 128 degrees. There the decomposing animal and vegetable substances originate this peculiar poison. He believed that it accompanied the individual, and that it did not travel by atmospheric power. He thought that the Government was responsible for permitting the disease to get in the land. A rigid, proper quarantine, universally adopted by the General Government, in combination with the British Provinces, would, in his opinion, prevent its admission to our continent. We had no quarantine, rightly considered. The disease in 1849 did not originate in Baxter street, New York, but took its origin from an infected person who escaped from quarantine. The cabin passengers escape, because the disease has not travelled 200 feet, nor 10 feet from the steerage to the cabin. He remarked that he did not believe in mysteries; but wished to understand in his own way. If the valuable information that he had obtained from Dr. Marsden were put into practical application by the General Government, he believed that millions of money and millions of lives would be saved.

Dr. Linton, of Mo., protested against the doctrines advanced this morning and evening. We had medical journals through which we could discuss this subject long before the cholera could get here, and a long time before quarantine could prevent its getting here. "Who can believe that cholera could have been prevented from coming here in 1849? I do not believe that it is any more contagious than intermittent fever. I am certain that nine-tenths of the physicians of this country are convinced of this fact. I say to the citizens of New York, Baltimore and Canada, you may have no fears of the cholera. If it comes it will arise in your midst. Cholera is not a disease (!)" He did not believe that there was any truth in the doctrine of contagion. "Cholera breaks out in ships after they are six weeks at sea. I saw a case in St. Louis two months ago. Where did the Asiatics get it from?"

Dr. Bell, of New York, thought the facts of Dr. Marsden inconsistent with the results of observation. Dr. M. had traced it first from a brig in Liverpool. He did not say that cholera existed

in Liverpool at the time. Dr. B. believed cholera can be traced to various places other than Asia. "If cholera is contagious, it takes various round-about ways of making short journeys. It took an exceedingly round-about way to the principal cities of Europe. Of the present epidemic, it is said the Mecca pilgrims first had cholera. The evidence I have collected are against strict quarantine. The passengers of the *Atalanta* were detained at quarantine. No cases occurred among the well passengers after they left the ship. Of all the likely things to originate cholera, none are equal to a crowded, filthy ship. None of the passengers or things of the *Atalanta* were taken to Ward's Hospital. I would protest against the indorsement of any restrictions against persons, advised by Dr. Marsden. The detention of well persons can never protect us against any disease. Our protection is in our clean houses, for cholera often leaps over healthy residences. The action of the health officers at the New York quarantine has been fatal to well persons, and had tended to ward off investigation of the places where cholera originated."

Dr. John L. Atlee, of Pa., remarked that it is difficult to know the facts in large commercial cities. "There are a thousand avenues to such cities as New York and Boston. But in the inland districts we are more likely to reach a better observation of facts. In 1832 I was in the midst of cholera at Lancaster County Hospital, Pennsylvania. I believed that cholera and yellow fever were diseases independent of any idio-miasmatic conditions of the atmosphere. In July or August, 1854, a certain peculiar condition of the air existed. The water of the Susquehanna was very low, and the water of the basin very filthy, yet there was no cholera. There were, however, some cases of bilious and intermittent fever. One day a car of emigrants came from Philadelphia to Columbia, two or three of the passengers were ill, and were put upon the platform. Four gentlemen seeing them there at the point of death, conveyed them to a shed. In the next twenty-four or forty-eight hours not one of them was living. In two or three days the cholera prevailed in Columbia. In the Lancaster County Hospital the winds were from the south. We had no cholera. A few days after the cholera broke out in Columbia, an emigrant reached there, afflicted with cholera. Shortly after two or three cases of cholera existed. The same train conveyed the cholera to Pittsburgh. Passengers came to the vicinity of Lancaster, at a place called Paradise. Their effects were sent to Lancaster, in a high and healthy location. The relative who washed the clothes died of cholera. It is a contagious disease. Why did it not spread? Why did not small-pox spread? There is an atmospheric constitution favorable to the development of disease. The result of observations in Sweden was that it had been conveyed there by the clothes of sailors. I think Dr. Marsden is right, and Dr. Sayre is right, and our friends in Philadelphia must come to the same conclusion, if they wish to preserve that metropolis from the ravages of the cholera."

Dr. Sayre said the quarantine law of New York, as now enforced, is a disgrace to civiliza-

tion. Dr. Carnochan himself, and others, saw the cases on Ward's Island, and they all came to the conclusion that they were not cases of cholera.

Dr. Bell remarked, that Dr. Geo. Ford insisted that the Ward Island cases he treated were those of cholera.

Dr. Sayre then quoted from Dr. Ford's official statement in the annual report of the Commissioners of Emigration, in which he (Dr. F.) stated on page 52, that those "twenty-seven deaths were caused by *diarrhoea* and dysentery." This was the official statement of Dr. Ford.

Dr. Marsden said that cholera followed human travel. He adduced other facts to demonstrate its contagious character. It is infectious in persons and personal effects. He urged the necessity of guarding against any communication between the infected and the well. Equanimity, cleanliness and temperance, were three great adjuncts to the quarantine.

Dr. Jewell, of Pa., said: "I have been charged with disseminating cholera. I have done all I could to prevent its entrance into Philadelphia. Cleanliness and ventilation will do much to that end. We have been engaged at that during the past winter. I do not believe in quarantining healthy people. That would be disseminating the disease, by giving it to the well persons on the vessels where cholera existed. We had the epidemic in the summer of 1849 in Philadelphia. It began in four different portions of the city. The first case was at Richmond, the second at Eighth and Spring Garden streets, the third in Moyamensing. These were all in the centre of the city, except at Richmond, and remote from the Delaware. The filth produced the disease in Richmond and along the Delaware. In 1832, the first case was on the Schuylkill, in a canal boat that came down from the upland country. There had been no foreign arrival in Philadelphia. It came from a poisoned atmosphere. In 1849 no flies were living. In Wheeling the birds died. The doctrine of contagion is dangerous, and will deprive the sick of assistance. Small-pox does spread, and if we had no vaccination it would spread more than it does. Contagion and infection are distinct. Contagion is the principle communicating the disease from one person to another. It is not so with cholera. There were no cases of contagion in 1832 or 1849. No vessels arrived with cholera on board. They may have arrived after the disease appeared. I am sorry the resolution was introduced. Next year we will be better able to test the value of Dr. Marsden's information. The poison of cholera will increase rapidly by contact with filth. It is only by purification of the city that cholera can be prevented."

Dr. Lee, of N. Y., followed with some brief remarks, sustaining the views of Dr. Marsden. It is contagious under certain circumstances. Certain neighborhoods of a very filthy character, were not attacked until emigrants came there.

The Committee of the Whole rose, and the Association adjourned without further action.



## FOURTH DAY.—Friday, May 4th.

The Association was called to order at 8½ A. M., by the President.

The Permanent Secretary read the minutes of the whole session, which were adopted.

On motion, Drs. C. C. Cox, Maryland, and J. C. Hughes, Iowa, were appointed delegates to foreign societies.

Dr. J. P. Garrison, New York, offered the following, which was unanimously adopted:

*Resolved*, That all the members of this Association urge upon the Legislatures of their various States the great importance of making it compulsory that all marriages, births, and deaths, be registered.

Dr. Mayburry, Pa., moved the adoption of the amendment offered last year by him, adding to paragraph 14, of the Constitution, (end of 15th line, p. 341, Trans. 1864,) after "unanimous vote," the following, "and shall continue such so long as they remain in good standing in the body from which they were sent as delegates."

The amendment was unanimously adopted.

The Committee on Rank of Medical Corps in Navy having failed to report, on motion of Dr. Cox, it was

*Resolved*, That Surgeons W. M. Wood, Ninian Pinkney, and David Harlan, U. S. N., be appointed a committee to report upon this subject at the next meeting of the Association.

Dr. Bartlett, Wisconsin, offered the following, which was unanimously adopted:

*Resolved*, That the thanks of this Association are hereby presented to the profession and citizens of this city, to the Mayor and Corporation of the same, and to the Governor and State authorities, for the kind and generous hospitality which has been tendered to the Association during its present session.

The report of the section on Practical Medicine and Obstetrics was read and adopted, and referred to Committee of Publication.

The Committee on Medical Ethics presented the following report:

The Committee on Medical Ethics, to whom were referred certain resolutions passed by the Montgomery County Medical Society, of Pennsylvania, would report:

That it is inexpedient for this Association to act upon the subject-matter of these resolutions, and that its proper reference would be to the Medical Society of the State of Pennsylvania.

On motion, the report was adopted, and the resolutions were so referred.

The sections on Surgery, on Hygiene, Medical Jurisprudence and Physiology, on Meteorology, Medical Topography and Epidemics, and on Chemistry, severally reported their minutes, which were received and referred to the Committee of Publication.

On motion of Dr. Mayburry, the amendment to the Constitution, increasing the fee for membership to \$5, was unanimously adopted.

On motion, the several amendments offered by Dr. Bissell, at the last session, were laid over.

A motion to adopt all the amendments was lost.

A motion to amend the Constitution, by making the basis of representation 20, in place of 10, was negatived.

Dr. Holton, Vermont, offered the following resolution, which was unanimously adopted:

*Whereas*, The author of the Essay, Dr. H. R. Storer, to which the prize of \$100 from this Association was awarded in 1865, refused to receive the amount thus awarded, consequently increasing the resources of this Association to that amount; therefore,

*Resolved*, That the thanks of this Association are hereby tendered to Dr. H. R. Storer, for this display of liberality.

Dr. Holton also offered the following, which was negatived:

*Resolved*, That at the future meetings of the Association there shall be held two general sessions, one in the morning, and one in the evening, unless otherwise ordered.

Dr. King, of Pennsylvania, offered the following:

*Resolved*, That this Association, approving of the system of quarantine proposed by Dr. Marsden, of Canada, as the most effectual means for preventing the introduction of cholera into this country, do most earnestly recommend the propriety of its adoption at all our ports of entry, to the favorable consideration of Congress.

Pending which, after much discussion, the Association went into Committee of the Whole, with Dr. Davis as Chairman.

The Committee, after quite a lengthy session, rose, and the President having resumed the chair,—

Dr. Davis reported that the Committee of the Whole, after much and earnest discussion, had laid the resolution of Dr. King, on the table, as well as one by Dr. J. H. Hobart Burge, N. Y., to a similar effect.

On motion of Dr. Cox, Dr. J. C. Tucker, of Nevada, was elected a member by invitation.

The section on Psychology reported their minutes, and requested the appointment of a Committee on Insanity, to report at the next annual session, to consist of Drs. I. Ray, of Rhode Island; Clement C. Walker, Massachusetts; A. B. Cabanis, Mississippi; W. S. Chipley, Kentucky; and John Fonerden, Maryland.

On motion, the minutes were read, and referred to Committee of Publication; and the Committee was appointed.

On motion of Dr. Taylor, Iowa, the following was unanimously adopted:

*Whereas*, After a long and laborious life, devoted to the practice of medical art, and promotion of the interests of medical science, Dr. D. L. McGugin, of Iowa, has been called to the final rest of all good men.

*Resolved*, That the Association, while deeply regretting the loss they have sustained, will ever keep alive the memory of his many virtues and professional worth, and commend the example of his untiring devotion to the common cause.

*Resolved*, That a copy of these resolutions be furnished his family, with the sincere condolence of this Association.

On motion of Dr. Garriah, New York, it was *Resolved*, That the members of this Association tender their heartfelt thanks to our professional brethren of Baltimore, for the liberal, cordial, and satisfactory manner in which they have entertained us.

The report of the Committee of the Whole on Cholera was then adopted, by a vote of 68 to 61.

Dr. H. R. Storer, of Massachusetts, offered his report as delegate to the last meeting of Superintendents of American Institutions for the Insane, and presented the following for adoption:

*Resolved*, That the Association recommend to the several medical and law schools of the country, the establishment of an independent Chair of Medical Jurisprudence, to be filled, if possible, by teachers who have studied both law and medicine, attendance upon one full course of lectures from whom, shall be deemed necessary before the Medical Degree is conferred.

*Resolved*, That while this Association regrets that the Association of Superintendents of American Asylums for the Insane, has not yet thought fit to unite itself more closely with the representative body of American physicians, it still is of opinion that such union is for their mutual and reciprocal advantage, and that it ought to be effected without further delay.

On motion, these resolutions were adopted.

On motion, Dr. Prince's report on Patent Rights among Medical Men, and the Essay on Angular Curvature of the Spine, were referred to the Committee of Publication.

On motion, the Association adjourned to meet on the 1st Tuesday in May, 1867, at Cincinnati, Ohio, at 11, A. M.

#### ENTERTAINMENTS.

On Tuesday evening a Promenade Concert and Entertainment were given to the Association by the profession of Baltimore, at Concordia Hall. In spite of a stormy evening, the members and their ladies were present in goodly numbers, and fully enjoyed the music and promenade, as well as a magnificent entertainment of a most substantial form, which was served up about 10 o'clock.

On Wednesday evening the sociable feature was continued by soirées at the residences of Drs. Cox, Bond, Smith, and Surgeon Simpson, U. S. A. Everything connected with these entertainments was such as to evince to the members of the Association, the kind hospitality and excellent taste of their hosts.

On Thursday evening the Association assembled *en masse* at the Maryland Institute, to partake of a monster banquet spread before them by the municipal authorities of Baltimore. Over four hundred gentlemen, including the Mayor, officers and members of the City Councils, with many prominent citizens, were seated at immense tables, occupying the main saloon of the Institute, while a fine band in the gallery added vastly to the pleasure of the evening. The supper having been disposed of, the customary toasts were given, and speeches made, which enlivened the scene until the assemblage dispersed about the hour of 12, P. M.

On Friday, the Association, including the

ladies, were conveyed in the beautiful and commodious steamer, Samuel J. Pentz, to Annapolis, and after a stroll through the principal streets, were received by his Excellency, Governor SWANN; and after speeches of welcome, the members and their ladies were formally introduced to the chief officer of the State, who entertained them in the most substantial and hospitable manner. The gay assemblage again embarked about 6, P. M., and after a pleasant voyage, reached Baltimore, thence to disperse to their homes.

[Reports from Sections, etc., next week.]

#### NEW YORK ACADEMY OF MEDICINE.

May 16th, 1866.

##### Hypodermic Injection of Morphia.

At an adjourned meeting of the Academy, Dr. CLARK related two cases, which he had recently observed, illustrating the good and ill effects of the hypodermic injection of morphia. In the first case the patient was apparently moribund, almost pulseless, frequent alvine evacuations, livid, etc., presenting the appearances of poisoning; and it was on examination discovered that the patient had, about a year ago, been advised by a medical practitioner to use aconite root. She had, however, neglected to follow his precautionary advice of stopping the medicine when certain symptoms would occur, and the result was cumulative poisoning.

Stimulants and the hypodermic use of morphia appeared to be the only means which would promise hope, and were consequently resorted to. Fifteen drops of MAGENDIE's solution were injected. In about a quarter of an hour the urgent symptoms commenced to be relieved, the pulse became stronger, the alvine discharges ceased; she became more life-like, and went into a sleep for two hours. She then awoke, when the symptoms returned. Another injection of the same quantity was practised, upon which the symptoms again subsided; she again fell into a sound sleep, and the next day was perfectly recovered.

The second case was that of a woman who was brought to Bellevue Hospital, with symptoms of incipient tetanus. She had been delivered with forceps some days before,—the operation having resulted in laceration of the uterus and vagina. Her jaws were firmly closed, and rigid. Hypodermic injections of morphia were resorted to, at intervals of 2 to 2½ hours; but the opiate treatment was followed by but slight effect, no considerable amelioration taking place. Soon after the last injection she became suddenly and profoundly narcotized, and died in spite of all that could be done. The post-mortem examination showed the vagina and uterus lacerated, with

some pus in the pelvic cavity, but no general peritonitis. It was also discovered that in the last injection the instrument had passed into a small vein. This probably accounts for the suddenness and profundity of the narcotism following.

#### Resection of the Elbow-Joint.

Prof. Post introduced a patient on whom he had operated ten years ago, and he looked upon the case as interesting, because it showed the results complete. The patient, a young lady, now twenty-one years of age, he had first seen when ten years old, suffering from ankylosis of the elbow-joint,—the result of an injury, probably a fracture, which she had received a year before, by being roughly handled. The ankylosis was not bony, but still very rigid and firm; and as the arm was nearly in a straight position, she had no use of it whatever, being unable to carry anything to her head and mouth.

The end of the os brachii was resected in two portions, until sufficient mobility was procured. At present she enjoys a very considerable use of the arm, motion at the joint being perfect, although the member is not developed as well as the opposite. It is about an inch shorter than on the other arm. She is able to lift a pail of water with it.

In this case there was but one straight incision made. Dr. Post considers this the best mode of operating, though perhaps a little more difficult than with the H incision or others. In his experience, the straight incision had been accompanied with better results than the others.

#### Purpura Hæmorrhagica; Death.

Dr. BULKLEY related a case of purpura hæmorrhagica, complicating small-pox, which proved fatal in the course of a few days. The local manifestation of the disease was very slight, showing itself only in intense redness of the nose, with some ecchymosis of the eyes. Two purpuric streaks were observed on the cheeks, on either side of the nose. No other local manifestation. The patient, however, vomited blood, and had copious bloody discharges from the bowels. There was delirium, but no coma.

#### Plastic Operation on the Mouth.

Dr. BUCK gave an account of a plastic operation performed by him about a year ago, involving the removal of a large amount of cicatricial tissue of the mouth and cheek, the result of a shell wound; the appearance of the patient was illustrated by cuts and photographs.

#### Report of the Committee on Hygiene.

At the same meeting, (May 16th,) Dr. STEPHEN SMITH read an elaborate report on the means of

relief in treating and preventing cholera, in which he gives an account of the measures already adopted in New York by the Board of Health. Ordered to be printed.

## EDITORIAL DEPARTMENT.

### Periscope.

#### Extrusion of the Uterus with the Fœtus still within its Cavity.

In the May Number of the *Detroit Review of Medicine and Pharmacy* Dr. E. W. JENKS, Physician to Harper Hospital, relates a case of extrusion of the uterus with the fœtus still within its cavity. The woman had been in labor four days under charge of a homœopath, when Dr. J. was called in. The waters had broken about 48 hours before, and the attending "doctor" described the case as progressing favorably, until the head was near the vulvar opening. Digital examination had disclosed the head presenting in the first position. When, after an intermission of some time, caused by the exhausted condition of the patient, the pains returned, the head and shoulders could be distinctly felt protruding from the vagina, but surrounded by something unusual at this stage of labor. Ocular examination revealed the fact that the head and shoulders were extended from the vulva, but *still in utero!* As the os uteri was no more dilated than at first ( $1\frac{1}{2}$  inches in diameter) the fœtal head could be distinctly seen, while the powerful propelling force of the abdominal muscles was pushing the uterus with its contents still further "into the world," and the overstrained os was beginning to tear at its anterior edge. The child being evidently dead, and rupture of the uterus threatening, under this condition Dr. J. encircled the fœtal head with his hands, for the purpose of preventing further protrusion or laceration, while Dr. T. who had also been called, reduced the head by craniotomy and then easily delivered the trunk with the crochet, through the circle made by Dr. J.'s hands. After removal of the secundines, the uterus was replaced in its normal position. There was little hæmorrhage and no further unpleasant symptoms. Convalescence was early established and the patient recovered her former health and strength.

The history of the case previous to labor explains the hindrance to its completion. At different times during pregnancy the uterus had been prolapsed and protruded beyond the vulva. At one time in climbing over a fence she slipped and severely bruised this dependent tumor, and an abscess in the muscular tissue of the organ resulted, which discharged for several weeks and then healed. The products of reparation in the healing of this lesion were the cause of difficulty in the dilatation of the os uteri in labor; for the cicatrix, formed of firm fibrous tissue, acted as an inelastic band, limiting the expansibility of the os beyond a given extent, which in this case was insufficient to allow the passage of the child.



## Medical and Surgical Reporter.

PHILADELPHIA, MAY 26, 1866.

### AMERICAN MEDICAL ASSOCIATION.

The Seventeenth annual session of the American Medical Association commenced in the city of Baltimore on the 1st inst. The minutes are published in this and the preceding number. The meeting, though not quite so large as was expected, was large enough, there being over three hundred members present, including a small delegation from the more southern States. Socially, the meeting was a decided success; we scarcely ever attended one that was more so. We cannot, perhaps, say that the profession and citizens of Baltimore and Maryland exhausted their powers in the way of entertainment, but we do not know what more they could have done, or how they could have done what they did, better. As one of the members said, the profession of Baltimore first gave the Association a cordial greeting on Tuesday evening, at a promenade concert, and one of the most elegant and well appointed soirées that its members ever attended; and, again at several private receptions on Wednesday evening; then the city authorities took them in hand, and on Thursday evening gave them an elegant and costly entertainment at the Maryland Institute;—and finally, as if this were not enough, the State authorities extended the hand of welcome, and conducted them to the capital, where, amid the holy associations that surround the first capital of the Nation, a splendid reception and entertainment were given at the Governor's mansion. This excursion, by steamboat from Baltimore to Annapolis, was a very pleasing and effective finale to the social features of this occasion.

But agreeable and important as was this part of the meeting of the Association, its sessions for business, the reading of scientific papers, and discussions, were the criteria by which to judge of the real value of the meeting to the profession. The material was abundant, but unfortunately it was not used to the best advantage,—certainly in the public meetings, where much time was lost in profitless talking. As this is, however, incident to nearly all public meetings, it is but an argument in favor of prolonging the sessions of the Association beyond three days, which time is consumed in most public bodies in getting into harness for the work before them.

The points of special interest connected with this meeting, were the Report from the Commit-

tee on Ethics on the practice of Specialties, the Lecture on Nervous Affections, and New Remedies, by Dr. E. BROWN-SÉQUARD, and the remarks by Dr. WM. MARSDEN, of Quebec, on Cholera, and the discussion it gave rise to.

The Committee on Ethics came in with a majority and a minority report on the practice of specialties. No true, high-minded man should, in our opinion, have objected to the majority report, which, so far from condemning the practice of specialties, rather favored it within proper professional bounds. The minority report was a sorry affair, an insult to the intelligence of the congregated wisdom of the medical profession of America; and the attempts of the ultra specialists to relieve themselves of so questionable a backing, were decided failures. Such a complete break down is not often witnessed. The whole bearing of these ultra specialists before the Association was offensive, as it has always been. The right to practice specialties has never been questioned by the Association, and never will be, so long as it is done within the bounds of professional propriety. But these men have thrust themselves upon the Association, and appeared last year at Boston, in a report from the chairman of their own committee—which, confessedly, he did not submit to the other members of the committee, because he knew they would not approve it—which was arrogant and insulting in the last degree.\* We think they should be satisfied with the exhibition they have already made of themselves, and spare the Association the execution of the threat that they will appear again and again, until their claims are recognized. These, so far as developed, seem to be simply that they be recognized as the leaders of the profession, and be allowed to advertise in the public newspapers. They can do both, to the extent of their ability—*outside of the Association*. That body has made no objection to the practice of specialties, and will make none, when carried on in the spirit of its code of Ethics.

The lecture by Dr. E. BROWN-SÉQUARD, on Nervous Diseases and New Remedies, was listened to with much interest by the members, and by the large audience in the galleries. We shall soon give an outline of his remarks, together

\* The legitimate conclusion which this gentleman has reached, may be learned by the following, cut from the columns of a daily paper of this city:

"**SURGICAL OPERATIONS ON THE EYE.**—Dr. HOMBERGER, OCULIST, editor of the 'American Ophthalmic Journal,' informs the public that he is prepared to perform all SURGICAL OPERATIONS necessary to restore SIGHT or correct DEFORMITY. In no case will he make a charge unless perfectly SUCCESSFUL. Dr. HOMBERGER can be seen at Dr. VON MOSCHIZSKER'S Office, No. 1031 WALNUT Street. Hours from 11, A. M., to 2, P. M."

with a notice of other of his deliverances on the subject.

The address of Dr. MARSDEN, of Quebec, on cholera, was a clear enunciation of his views on a subject of great, and just now, of growing importance. It was listened to with great attention and interest by the Association, and the general audience; and if there had been less disposition manifested to *force* the Association to commit itself to the views held by that gentleman, more good would perhaps have been accomplished, and the Association have placed itself on the record with more positiveness, than now appears. A good deal of the time of the Association was consumed in the discussion of this subject, and the dreadful fear of the "non-contagionists" that the Association would make a record that had the very slightest tendency in the opposite direction, prevented any practical or useful result flowing from it. It was desired that some recommendation should emanate from the Association, which should at least give the country the benefit of any doubts that might exist in the minds of the profession on the subjects of portability and specific contagion, and by recommending the establishment of a rigid quarantine, prevent, if possible, to do it in that way,—the introduction of this awful scourge into our country. As it was, the influence of the Association was rather against any attempt to prevent the introduction of cholera into the country by means of quarantine,—even the very reasonable and "conservative" resolution of Dr. BURGE, of Brooklyn, having been voted down. We are, however, of the opinion that this was, in reality, contrary to the sense of the meeting; and that had the President not lost his equanimity—as he did on several occasions—and put the question at the proper time, and in such a manner as to be fully understood, a decided majority would have been found favorable to the adoption of the resolution. We do not understand that the doctrine of specific contagion was held by many—if any—of the members, while we have little doubt that a majority were well convinced of the portability of the disease.

The subject of medical education excited considerable interest, but did not receive the attention that it merited for want of time. We hope to be able soon to present a full report of the able and convincing remarks of Dr. N. S. DAVIS on the subject. We trust that the call for a meeting of the delegates from the Colleges of Cincinnati next year will be heartily responded to, and result in something practical. In the

meantime, the subject should be fully discussed in the journals.

There was a large amount of business done in the various Sections, and it will be seen that the Association reaped a rich harvest of literary material for its next volume of Transactions. The adoption of the rule limiting the time allowed authors of papers for proof-reading, will, it is hoped, have the effect of enabling the Publication Committee to issue the volume earlier than heretofore.

Many important items of business were passed over for want of time. If the Association had a *Business Committee*, to whom all resolutions, reports from the Sections, and other business, could be referred to be digested, and put in proper shape before being presented in open meeting, it would greatly facilitate the transaction of the business of the Association.

The Reports of the meetings of the Sections, and the meeting for the discussion of the cholera question, after the Association adjourned, must be deferred till next week.

#### A "STATE BOARD OF HEALTH" IN NEW JERSEY.

By resolution, the Legislature of New Jersey, during its last session, directed the Governor of the State to appoint a Sanitary Commission, or State Board of Health, to communicate with the Governor regarding measures of sanitary improvement throughout the State. This action of the Legislature had been induced by the appointment of a Committee of the Medical Society of the State, who waited upon the Governor, suggesting that steps should be taken for better sanitary supervision and improvement.

The Commission thus appointed by the Governor have made a report, which has been published in the newspapers, and which is a very sensible document, as far as it goes. It contains, in a concise form, the main points of the laws of hygiene,—ventilation, cleanliness, etc.; and regarding cholera, the principal rules of dietetic and hygienic prophylaxis. As a popular document, addressed to sensible, intelligent people, it is well worthy of being read in every family in the State.

But the difficulty in this matter of sanitary improvement is, that the very classes of population everywhere, among whom sanitary reforms and hygienic measures are most needed, are often neither sensible nor intelligent, nor have they, in very many instances, the facilities to pay strict attention to a volunteer enforcement of sanitary rule. Hence it is, that, however well

meant, all mere suggestions in the form of popular reports, manifestos, or proclamations, practically amount to precious little. How many people in the thickly inhabited towns and cities, among the laboring class, will be induced, even if the report of this and similar commissions should reach their eye, to commence sanitary reforms, even in their own families?

The history of sanitary reform in all countries has sufficiently demonstrated, and the lamentable experience—especially of the city of New York—has fully shown, that no real change for the better can be accomplished, except by an efficient sanitary code enforced by the strictest executive force. To people who have a constitutional aversion to the use of water and soap, it is useless to talk about the necessity of keeping open the pores of the skin. And of the thousands who live crowded together, earning their bare, miserable livelihood by hard work from sunrise to sunset, it can hardly be expected that they should be very particular in regard to the sanitary condition of their abodes, when the difficulties of keeping quarters clean and healthy increase just in the ratio of the number of people living to a given number of square feet.

Hence it is that any attempted reform must be based, first and foremost, upon *compulsion*. Nothing else will do. Any community has a perfect right, for the purpose of self-protection, to force every body who chooses to be one of its members, to live in a manner which shall not endanger the health and lives of others; and the real question is simply what compulsory means are the most practicable and efficient.

In this view of the subject, we must confess to a certain degree of disappointment in failing to see in the Report of the Sanitary Commission of New Jersey any attempt, not even a suggestion, toward giving the people a sanitary code based on the principle of compulsion. The opportunity of the Commission was a splendid one. Originating from the Medical Society of the State, endorsed by the Legislature, and backed by the Governor, the Commission had everything in their own hands, and we can hardly be satisfied with a report which simply repeats rules of personal hygiene, and the principles of prophylaxis of cholera, and leaves such questions as compulsory vaccination, registration of vital statistics, the poor-house system, and the care of the chronic insane, laws regarding the erection of tenement houses, etc., etc., in *statu quo*. Nor is this disappointment lessened, when in the important matter of quarantine the same non-committal policy seems to pervade the report which has

generally characterized the action of medical men in New Jersey on this subject.

However, the labors of the Commission, we hope, are not yet finished, and we trust that when the Legislature meets next year, it will be prepared, sustained by the Medical Society of the State, to submit for adoption a sanitary code and system of sanitary superintendence which will be a credit to New Jersey, and a model for adoption by other States.

#### QUARANTINE AND CONGRESS.

The following concurrent resolution has been adopted by both Houses of Congress, after considerable debate and amendment by the Senate:

*"Resolved, by the Senate and House of Representatives of the United States of America, in Congress assembled, That the Secretary of the Treasury be, and he hereby is authorized to make and carry into effect such orders and regulations of quarantine as in his opinion may be deemed necessary and proper, in aid of State or municipal authorities, to guard against the introduction of the cholera into the ports of the United States; and the Secretary of the Treasury is further authorized to direct the revenue officers, and officers commanding revenue cutters, to aid in the execution of such quarantine and health laws as may seem necessary."*

We have very little faith that any good will come from this resolution. With all due respect for the ability of the gentleman who holds the office of Secretary of the Treasury, we cannot, by any possible stretch of our imagination, conceive how he can, with a few revenue cutters and officers, so aid in the execution of present quarantine and health laws as to render them efficient.

The whole matter is left to the discretion of the Secretary. He is *authorized*, not *instructed* to act in the matter, and this authorization has reference only to such orders and regulations, as, *in his opinion*, may be deemed necessary and proper. Suppose, in his opinion, nothing is necessary and proper in the premises?

The Secretary's opinion, relating to quarantine matters and health laws, may be as good and sound as any that could be advanced, though we confess of never having heard his name mentioned as a prominent sanitarian, and we doubt if the labor of keeping the national finances straight, and the accounts of the governmental credits and debits in order, will leave him much time to devote to the subject in question. Probably, and that will be the wisest thing for him to do under the circumstances, he will wait until the State or municipal authorities mentioned in the resolution invoke his aid, when such revenue



cutters as can be spared from their legitimate pursuit may be turned over to the aforesaid authorities, for such uses as they may be able to get out of them for quarantine purposes, which, we think, will amount to very little.

To ordinary mortals, who are not imbued with the practical wisdom that seems to float in the very atmosphere of the halls of Congress, it would appear, that if any measures regarding the prevention of disease by quarantine regulations and the enforcement of sanitary laws were in question, common sense would point out to our law-makers the propriety of consulting somebody who knew something of the matter, and to entrust their enforcement to a class of men, who, by their profession, have made the laws of health and of disease a special study. If the members of the House of Representatives and of the Senate had taken any pains to obtain the required information, they would easily have discovered that there is such a person as the Surgeon-General of the United States, and that the State and municipal regulations, as they exist at present, are deficient, not so much on account of a want of knowledge, or want of a few revenue cutters and revenue officers, but on account of insufficient jurisdiction; the multiplicity of State and municipal interests, and the want of a strong authoritative head. For instance, New York has established a quarantine as well as she can, providing, on such grounds as are under her jurisdiction, accommodations for vessels and passengers under quarantine. These accommodations, even with the available help of all the revenue cutters under control of the Honorable Secretary added thereto, are insufficient, as those who are acquainted with the demands made by the vast numbers of emigrants arriving from Europe will admit. On the other hand, New Jersey, which State has repeatedly refused to act with New York in the matter of aiding in establishing efficient and proper accommodations for quarantine, although as much interested as the former State in keeping pestilence off our shores; and while her politicians generally assume to consider such a demand as an outrage upon her State Rights, they would look upon the reasonable and just request that she shall establish a quarantine for herself, to protect the people, as equally an outrage upon her purse.

If, between the incapability of one State and the unwillingness of the other, the public interests are allowed to suffer, and the introduction of epidemic disease rendered easy, or if the limited accommodations for detained passengers are such as to throw the odium of inhumanity and barbar-

ism upon the American people, surely there is reason sufficient why the national government should interfere, and in the exercise of its constitutional power to regulate national intercourse and traffic, should establish a quarantine code such as would take away the reproach of inhumanity and be a sure protection against the importation of disease. For those who happen to live comfortably in cities which are not centres of international travel, and at whose port there are no daily arrivals of vessels with thousands of emigrants on board, it is easy to denounce the restrictions of quarantine. But if they lived in the city of New York, and had opportunity of observing the filthy, reeking; and hence demoralized condition of these emigrant passengers as they arrive, after more or less protracted voyages in overcrowded vessels, they would be forced to admit that both passengers and vessels should be forced to undergo a thorough cleansing and purification, before they are allowed to mingle promiscuously with the population, even when there is no danger of epidemic disease, but simply as a measure of general hygiene. It is a matter which concerns the welfare of the emigrant as well as the public at large, and as emigration to this country forms one of the great unprecedented events of this century, upon which much of the future development of our national resources, prosperity, and happiness depends, it is the duty of Congress to provide, by proper legislation, a code of quarantine or protection to emigration, by which these exigencies will be provided for.

The question whether Congress has the power to establish quarantine, came up during the discussion of the resolution in question. It was, we think, effectively disposed of by Senator SUMNER, who said that as cholera—and he might have added all other epidemic and foul-air diseases—came through passengers, under the law to regulate the carriage of passengers, there was power to make laws respecting their health. Of course there is.

The subject was prominently placed before Congress by the action of a large number of members of the American Medical Association, at its late meeting in Baltimore, who signed the following resolution:

*Resolved*, That the undersigned, being deeply impressed with the necessity of prompt and efficient measures for protecting the community against the approach of Asiatic cholera; and, believing that the scientific investigations since 1832 have demonstrated the portability and the communicability of this disease, petition your honorable body to adopt an uniform and

general system of quarantine at every port, as recommended by Dr. MARSDEN, whose plan we beg leave respectfully to submit.

The Association, as such, resting on its conservative dignity, preferred a non-committal course, and refused to pronounce itself decidedly, one way or the other. But the time will yet come, we are sure, when the whole profession will be unanimous that the general government should, under the *authority of its chief medical officer*, provide for a sanitary code regulating international intercourse, travel, and emigration, by which all danger of the introduction of epidemic disease will be reduced to its minimum, the health, the comfort, the morals of the people will be protected, and the shocking apology of a quarantine, as it exists at present, a disgrace to our country, will be forever removed.

## Notes and Comments.

### Mortality of New York.

Dr. E. HARRIS, in his mortality report for the week ending May 12th, gives 432 as the total number of deaths—a mortality equivalent to an annual death-rate of 30.92 to 1000 inhabitants. This is a marked decrease, and it is noticed to be almost exclusively in the list of miasmatic or foul-air diseases, which last week killed but 84 persons, while five weeks ago, the same list stood at 112.

Scarlatina diseases, and the kinds of domestic pestilence that are usually propagated by neglect of ventilation and cleansing, have greatly diminished; but it will be noticed that tender infancy is still subjected to causes of mortality which neither open windows nor the improved cleanliness of the streets have removed. Marasmus, convulsions, and the diarrhoea of inanition, were the chief causes of mortality in the 110 badly-nursed infants who died last week before their first birthday.

The mortuary record of Brooklyn presents the same pleasing fact as that of New York, in respect to the entire absence of epidemic diseases, so far as can be shown by such records. If now, while the epidemic of cholera is yet distant from us, the wholesome dread of it shall lead all classes of our fellow-citizens to second our official labors and obey the instructions of the Board of Health, the evil they dread will almost certainly be avoided, for, as has well been asserted by the best sanitary officer in Europe, Dr. SIMON, "the specific migrating power of cholera, whatever its nature, has the faculty of infecting dis-

tricts in a manner detrimental to life, only when the atmosphere is fraught with certain products susceptible, under its influence, of undergoing poisonous transformations. Through the unpolluted atmosphere of cleanly districts it migrates without a blow; that which it can kindle into poison lies not there."

### Sprinkling the Streets.

This subject was discussed at a recent meeting of the Metropolitan Board of Health.

Dr. PARKER said that the wetting of Broadway was an intolerable nuisance in many ways, which should be abated at once, and every effort made to prevent its recurrence. He said that when the streets are covered with organic matter and the weather is hot, desiccation is the result, and very little detriment to health occurs; but if water be added, then decomposition takes place, and the atmosphere we breathe becomes loaded with deleterious gases, which help to breed any of the poisonous diseases. He would, therefore, offer the following resolution:

*Resolved*, Therefore, that no sprinkling or watering of the streets be permitted in *hot weather*, except where the streets are *entirely* clear of all organic matter, and then only in the morning until 7 o'clock.

The resolution was referred to the counsel, with the request that he should prepare an ordinance to meet the views of the Board as expressed in Dr. PARKER's statements.

### Chloroform.

The frequent fatal accidents from the administration of chloroform have had this result that the use of this anæsthetic is gradually being discarded by the profession. In Lyons it has not been used for years, and the medical society of that city has after long discussion, adopted unanimously the following conclusions:

1. Rectified ether employed as an anæsthetic is less dangerous than chloroform.
2. Anæsthesia is produced as regularly and completely by rectified ether as by chloroform.
3. Ether is in some respects less convenient in use than chloroform; but the inconveniences attending its use are of little consequence when compared with the dangers inherent in the employment of chloroform.
4. Consequently, ether should be preferred to chloroform.

Dr. SAMUEL R. PERCY has been appointed a Clerk of the Metropolitan Board of Health of New York, and assigned the duty of Inspector of Milk.

## Correspondence.

## DOMESTIC.

## Cholera.

EDITOR MEDICAL AND SURGICAL REPORTER:

I notice in your issue of May 12th, a report of two cases of Asiatic Cholera, so called, having occurred in the city of New York, one of which terminated in death 20 hours after seizure, and the other is reported as likely to live. In the first case "the post-mortem examination, conducted by Dr. HARRIS, revealed the usual lesions of cholera;" and in the second the record is "he"—the physician called—"found the symptoms to be those of undoubted cholera."—May I be pardoned if I do not agree to this? With regard to the character of Asiatic or other cholera, it is of the utmost importance that in the first place we agree on terms. It is well known that there are three diseases very much resembling each other, each of them capable of producing a fatal result, but radically different. They are all of them characterized by excessive action of the alimentary canal, and in proportion as the attack increases in intensity bring out the peculiar features of collapse—the cold, clammy, wet, blue skin and pinched features, while the voice becomes husky and often sepulchral in tone, and cramps come in to put the sufferer in torture. They are each dependent on a peculiar exciting cause, and as it seems to me, for want of discriminating properly between them, much of the confusion and indisposition on the part of the profession to accept the specific and contagious element of true cholera, has arisen. This question is discussed at some length in the *Medical Times and Gazette*, of London, Sept. 7th, 1865, to which the reader is referred; suffice it in this connection to state that the writer there recognizes the three varieties of cholera under the terms of *septic cholera*, or cholera from exposure to poisonous gases; *endemic hepatic cholera*—common cholera, cholera morbus, sporadic cholera; and *epidemic intestinal cholera*, or true Asiatic cholera. The first affects those who are exposed to animal effluvia, whether from dissecting rooms or abattoirs, and to the emanations arising from privy vaults and sewers, as well as of noxious gases. The second shows itself in consequence of some change in the relative proportion of fluids and solids in the body, caused by atmospheric variations in temperature, etc. The third and last is caused by the circulation in some way of a specific poison in the system, and in this way

is capable of being perpetuated from one person to another, while the first two are not contagious in the slightest degree, nor capable of being propagated except by the operation of the original exciting causes.

Of the first two forms of disease, repeated instances, well marked, have been noticed in this city, within a twelve month, but up to the present time not even the most determined supporter of the epidemic theory of Asiatic cholera has affirmed that that disease was prevailing in our community. I see in this case of Mrs. JENKINS no reasons for going beyond septic cholera for a cause of death. She was attacked as many of the persons engaged in removing night soil are, when they first begin their occupation, and are not inured to the sickening filthy odors which constantly assail them; and was practically a neophyte undergoing a seasoning process which proved too strong for her, female as she was.

In regard to the second case, no symptoms being reported beyond diarrhoea and vomiting, and these occurring in the beginning of many summer diseases and common to all kinds of cholera, there is at least a doubt whether or no Asiatic cholera has yet made its appearance within the limits of the city of New York.

In times like the present, when the public mind is ready to believe almost any report that comes from a respectable source, too much care cannot be exercised in ascertaining beyond a reasonable doubt, and with all the patience that skill and experience can aid, the true character of every case of disease like the two which have formed the subject of this commentary. I trust Mr. Editor, that this subject of the difference between the three diseases mentioned will be thoroughly and freely ventilated.

Yours very truly,

WILLIAM READ, M. D.

Boston, Mass., May 15, 1866.

## "Army Itch."

EDITOR MEDICAL AND SURGICAL REPORTER:

Having noticed in several of the late numbers of your valuable and interesting Journal, communications relating to the "epidemic or army itch," I concluded to give you my experience and plan of treatment in this peculiar disease. I, like Dr. L. C. BUTLER, have found the disease indigenous to the Southern States, and according to my experience it is more prevalent in Missouri, Arkansas and Tennessee, and in the order they are here mentioned, than in the other Southern States that I have visited. En passant, I would remark that I have been a resident of nearly



every one of the Middle and Gulf range of States, at least, for a long enough time in each one, to observe some of the diseases of each.

In Missouri and Arkansas this disease is more common among children under fifteen years, but in Tennessee it is more prevalent among adults. I consider the "army itch" (which name I have always given this disease) contagious; particularly among members of the same family or company; or when frequent and close contact takes place, where two or more occupy one bed, or use the same blankets or articles of clothing. It is not confined to any one portion of the body, but I have generally observed the rash to be more plentiful upon the inner aspect of the upper portion of the thighs, lower portion of the abdomen, and inner aspect of the fore-arms.

The plan of treatment that I have generally adopted is similar to that suggested by Dr. BURLER, but in many respects more simple, more allied to the common treatment of scabies. I generally begin the treatment by a free and full cathartic; for almost always the bowels are constipated and loaded with fecal matter; at the same time I direct the patient every evening before retiring to bed, to take a sponge bath of warm water, containing a large proportion of soft soap—or what is better, a kind of family hard soap made from the lye of wood ashes and fat boiled together; more commonly found in every house at the south than any other kind of soap. He is to bathe in this for several minutes, then on coming out of the bath to rub down with a coarse towel, then to apply to that portion of the surface where the rash is, the official compound sulphur ointment; or what I have found still better, more agreeable and more readily applied, kerosene or carbon oil; this latter to be slightly warmed, and well rubbed in with a piece of flannel.

The bowels are to be kept in a soluble condition during the whole treatment by epsom salts, cream of tartar and sulphur; the last two in combination with honey, in form of an electuary, is a very nice preparation for children; diet to be nourishing, and nearly all vegetable. I have found that from careful attention to the carrying out of the plan of treatment above laid down, the disease will almost always yield in from ten days to two weeks.

W. E. WHITEHEAD,  
Assist. Surg. U. S. A.

*Cape Disappointment, Washington Territory,  
April 4, 1866.*

— HIPPOPHAGY. In Berlin in 1865, hippophagists ate 2241 horses. The flesh is reported to be "good, honest, but toughish, beef."

## News and Miscellany.

### The Metropolitan (N. Y.) Board of Health; Additional Powers.

Governor FENTON, of New York, has issued a proclamation, investing the Metropolitan Board of Health with additional powers, as follows:

STATE OF NEW YORK, EXECUTIVE DEP'T, }  
Albany, 14th May, 1866.

The Metropolitan Board of Health, at a regular meeting thereof, held in the city of New York, on the 4th day of May, 1866, adopted the following resolutions:

*Resolved*, That in the judgment of this Board, and in fact there is the presence of great and imminent peril to the public health in the Metropolitan Sanitary District of the State of New York, created by chapter seventy-four of Session Laws of said State, passed February 26, A. D., 1866, (by reason of impending pestilence,) within the meaning of the provision in relation thereto, contained in section sixteen of same act; and the said Board does now, in good faith, hereby declare, that for preservation of the public health, the said Board should take the measures, and do and order, and cause to be done the acts, and make the expenditures (so far as this Board may find needful about said acts and measures) hereinafter specified, in addition to those specified by the resolutions of this Board passed on the 13th day of April last, that is to say:

*Resolved*, That the measures to be taken, the acts to be done, or caused to be done, and expenditures to be made by this Board in the discharge of its duty by reason of such peril, in addition to those specified in said resolution of April 13, are the following, so far as they can be specified:

1. The establishment and support of suitable buildings for the detention and accommodation of persons recently coming from any vessels on which there has been any case of cholera, ship fever, or other contagious disease, and to support such persons at such establishments during such period as this Board may deem necessary for the public health.

2. The removal from all cellars of all persons who may make such cellars their place of dwelling or lodging, and the furnishing of such persons, when so removed, with other dwellings and lodging places, for such period as this Board may deem necessary for the public health.

3. Using the proper means and agencies for the prompt and efficient exercise of the foregoing powers, and what is incident thereto, in such manner as the public peril in the opinion of this Board may render needful to guard the public health in respect to the cholera, ship fever, typhus fever, or other contagious disease.

4. Making such expenditures, incurring such pecuniary obligations, and borrowing such money about any measures or matters aforesaid as the Board may find or declare needful.

Having duly considered the foregoing proceedings of the Board of Health, I do hereby, by virtue of the authority contained in section 16 of the act therein mentioned, approve of subdivis-

ion one of the foregoing resolutions, the authority, so far as practicable, to be exercised in accordance with the provisions of section 47 of chapter 358 of the laws of 1863.

I also approve of subdivision two of said resolutions.

I also approve of subdivision three of said resolutions.

I also approve of subdivision four of said resolutions, to the extent only, and to the end that said Board may make such expenditures and incur such pecuniary obligations as may be needful for the purposes above specified.

R. E. FENTON.

#### Cholera in Germany.

A letter from the Grand duchy of Luxemburg says: "The greatest alarm prevails throughout this district, owing to the dreadful ravages made by cholera at Diekisch and the surrounding villages. Between the 1st and the 3d (April) the deaths amounted to 100, out of a population of only 2000 souls. The disease made its first appearance at Clemenci, near Arlon, to which village it was brought, according to report, by a workman from Paris. It soon spread to Mamer, Eich, Dommeldange, Weimerskisch, Luxemburg, and Diekisch, apparently following the water-courses."

— Dr. ROSS LATTIMORE, formerly of Jeffersonville, Ind., was murdered at his residence near Cave-in-Rock, Ill., recently, by robbers, who entered his house, and shot him down in the presence of his wife.

— A HUMAN CURIOSITY. The Berlin newspapers have the following curious paragraph: "A Hungarian girl, born at Odenburg, without hands, now twenty years of age, has been giving some curious representations in the Prussian capital. She performs with her mouth the functions of hands. She sews, embroiders, executes the most delicate work with pearls, even threads her needles and makes knots, all with the tongue, apparently without difficulty, and certainly without the assistance of any one. Part of the works thus executed are destined for public exhibition." Most people will hesitate to believe such marvels until they witness them.

— A prize of four hundred francs is offered by the Educational Society of Lyons, France, for an essay to determine how far the want of success in children's education is due to their parents, and how far to their schoolmasters. The essays may be written in any language.

— DETERMINATION OF STRYCHNIA AND BRUCIA. Dr. DRAGENDORF, of St. Petersburg (*Pharm. Zeitschr. f. Russl.* IV. p. 233), has estimated the proportion of alkaloids in nux vomica by boiling the rasped seeds three times successively in eight times their weight of very dilute sulphuric acid, evaporating with magnesia, treating the residue with alcohol, and the alcoholic extract with benzene, which process gives, however, not pure strychnia, but the gum of strychnia and brucia. The author has found Prof. F. F. MAYER's process (*U. S. Dispensatory* p. 1542, 12th ed.) very satisfactory, but does not know of the separation of strychnia and brucia by means of baryta.

— VALUE OF POTATOES AS FOOD. A German agricultural paper states as the result of experiments made for the purpose of ascertaining the relative value of small and large-sized potatoes, that the larger potatoes are richer in nutritious matter, and therefore cheaper. Of three sizes, one that of walnuts, the second the size of small hen's eggs, the third of that of medium-sized apples—the proportions of dry substance were as 22.7; 22.9; 24.8 per cent. and the percentage of starch as 14.6; 15.2 17.2; per cent.

#### MARRIED.

BRANDAU—ROEHL.—Near Knoxville, Tenn., at the residence of the bride's father, by Rev. John F. Spence, Dr. Gustavus H. Brandau and Miss Charlotte C. Roehl, daughter of Adolph Roehl.

BURCHARD—HAFF.—In Brooklyn, May 17, by Rev. Morgan Dix, D. D., L. J. Gregg Burchard, M. D., of New York, and Miss Carrie V. Haff, daughter of the late Jacob Haff, of Newark, N. J.

CONVERSE—POLLARD.—At Williamsville, Hanover county, Virginia, on the 3d inst. by the Rev. A. Converse, D. D., the Rev. F. B. Converse and Ellen Elisabeth, daughter of George William Pollard, M. D.

DARLINGTON—MOODY.—May 8th, by Rev. S. S. Belville, Rev. N. W. Darlington and Miss Ella R. Moody, daughter of Dr. John B. Moody, of Newport, Ky.

FAUNTLEROY—CONRAD.—April 26th, at Winchester, Virginia, by the Rev. J. R. Graham, Dr. A. M. Fauntleeroy, of Staunton, and Miss Sallie H. Conrad, daughter of the Hon. R. Y. Conrad, of Winchester.

FOWLER—LONG.—May 14th, 1866, by the Rev. R. Lee, Dr. J. E. Fowler, of Canfield, Ohio, and Miss Mary E. Long, of Lawrenceville, Pa.

GRANT—MAGDOON.—In Boston, April 22d, by Rev. O. T. Walker, Dr. William H. Grant, of Ossipee, N. H., and Miss Fannie Magdoo, of Farislovot, Minnesota.

HARBERT—STOUT.—At Nashville, Tenn., April 26, 1866, by Rev. Dr. Bunting, Dr. Edwin A. Harbert and Miss Irene B. Stout.

HARRIS—DAVIDSON.—In this city, May 15, by Rev. H. D. Ganse, Hamilton Harriot, M. D., and Mary A. Davidson.

HILLIER—EVERHART.—May 15th, by Rev. D. C. Reed, Dr. J. W. Hillier and Miss Sallie M. Everhart, all of West Middlesex, Pa.

HUGER—LOWNDES.—At Charleston, S. C., May 10, by the Rev. Mr. Howe, Dr. William H. Huger and Sabina H., daughter of Charles T. Lowndes, Esq.

JERNEGAN—KING.—May 14, at West Farms, Westchester county, N. Y., by Rev. Mr. Appleton, Capt. Holmes M. Jernegan, of Edgartown, Mass., and Miss Belle King, eldest daughter of R. A. King, M. D., of New York city.

JONES—ROOTS.—On the 15th inst., by Rev. Dr. Tenny, of Oxford, O., Dr. George Edwin Jones, of Cincinnati, and Miss Ellen Yale Roots, daughter of Philander H. Roots, Esq., of Connersville, Ind.

KAUFMAN—TUCKER.—In Pottsville, Pa., May 1st, by Rev. H. C. Shindle, Dr. J. H. Kaufman and Miss Mary G. Tucker, only child of J. W. and Sarah Tucker.

KIRKBRIDE—BUTLER.—In New York, May 17, by Rev. George L. Prentiss, D. D., Thomas S. Kirkbride, M. D., of Philadelphia, and Eliza Ogden, daughter of the late Benjamin F. Butler.

LEWIS—GWYNN—GWYNN—LEWIS.—May 16, by Rev. Dr. Chauncey, William H. Lewis, Jr., and Mary Louise, daughter of Dr. Stuart Gwynn; and at the same time, by the same clergyman, Stuart Gwynn, Jr., and Mary Jane, daughter of W. H. Lewis, Esq., all of New York.

MONELL—BLACK.—In this city, on the 15th instant, by Rev. Alexander Reed, D. D., Joseph A. Monell, M. D., of New York, and Harriet E., daughter of the late Thompson Black, of this city.

MOON—GORDY.—May 1st, 1866, by Rev. J. M. Adams, Jonathan Moon, M. D., and Miss Malvina Gordy, both of Jeffersonville, Pa.

STONER—HENDERSON.—At Hummelstown, Pa., on the 15th inst., by the Rev. E. Huber, Wm. B. Stoner, M. D., of Westminster, Md., and Miss Maggie E. Henderson, daughter of the late Dr. Wm. Henderson, of Hummelstown.

THOMSON—SLACK.—At Emmanuel Church, Baltimore, by Rev. O. Perinchief, Alexander Thomson, M. D., and Miss Minnie, daughter of C. Slack, Esq., all of Mount Savage, Allegheny co., Maryland.

VAUGHAN—WELLS.—At Cambridge, Mass., April 22d, by Rev. J. R. Wells, of Quincy, Dr. C. E. Vaughan and Miss E. F. Wells, daughter of the late Rev. G. W. Wells, both of Cambridge.

WILLIAMS—CUTLER.—At Sparta, N. J., by the Rev. R. Vanhorne, 15th inst., Wickham Williams, Esq., of New York, and Miss Jeannie C. Cutler, of Sparta, daughter of the late Elias C. Cutler, M. D., late of Morristown, N. J.

## DIED.

**DUVALL**.—In New York, May 18, Eliza Ann Ogden, relict of Joseph W. Duvall, M. D., and sister of Dr. Benjamin Ogden, in the 56th year of her age.

**FROST**.—In Charleston, S. C., on the 7th inst., Henry R. Frost, M. D., a distinguished physician of that city, and founder of the South Carolina Medical College, aged 70 years.

**GRAHAM**.—At Shawangunk, Ulster county, Thursday, May 3, Dr. George G. Graham, aged 71 years.

**JENKS**.—In Detroit, Michigan, April 25th, Julia L., wife of Dr. E. W. Jenks, aged 27 years.

**PAUL**.—In Trenton, N. J., on the 18th inst., Mrs. Helen P. F., widow of the late Dr. James Paul, in the 64th year of her age.

**SMITH**.—In this city, on the 15th inst., after a lingering illness, Mary K., youngest child of Dr. Albert H. and Emily Kelghn Smith, aged 14 months and 15 days.

**TAYLOR**.—In this city, on the 10th instant, Dr. Dewitt C. Taylor, in the 38th year of his age.

**THOMPSON**.—In Charlestown, Mass., May 11, Dr. Abraham R. Thompson, aged 85.

**WILLSON**.—In Pittsburgh, May 5th, Pierce Grant, son of the late Dr. J. H. and Anna M. Willson, aged 15 years, 5 months, and 5 days.

**WISTAR**.—At Hilton Farm, near this city, on the 13th inst., William Wilberforce Wistar, son of Caspar Wistar, M. D., aged 29 years.

## OBITUARY.

## Dr. C. P. Tutt.

At a meeting of the Medical Board of the Philadelphia Hospital, the following resolutions were unanimously adopted:

*Resolved*, That the Medical Board have heard with feelings of profound sorrow, of the death of our colleague, Dr. CHARLES P. TUTT, from disease contracted in the wards of the Hospital.

*Resolved*, That in Dr. TUTT we always found the polite gentleman, the agreeable associate, the zealous student, and the attentive and skilful practitioner of medicine, always at his post of duty, despite its dangers and responsibilities.

*Resolved*, That the Medical Board tender individually and collectively to the family of Dr. TUTT, our deepest sympathy in their affliction, and assure them that we will always cherish the memory of our deceased associate with heartfelt gratification.

*Resolved*, That a copy of the above resolutions be transmitted to the family of Dr. TUTT, the Board of Guardians, and that they be published in the medical journals of our city, duly attested by the President of the Medical Board.

ALFRED STILLÉ,  
President of the Medical Board.

## ANSWERS TO CORRESPONDENTS.

**Dr. F. L. G., Thompsonstown, Pa.**—Lallemand's Porte Causique sent by messenger, 19th inst.

**Dr. L. D. W., Messengersville, N. Y.**—Manual on Birds sent by mail, 18th inst.

**Dr. W. P. McN., Shirlaysburg, Pa.**—Obstet. Forceps, and Spring Lancet, sent by Express, 17th inst.

**Dr. J. W. B., Tremont, Pa.**—Meigs' Diseases of Women, and Brown's Diseases of Females, sent by Express, 15th inst.

## METEOROLOGY.

May,	7.	8.	9.	10.	11.	12.	13.
Wind.....	E.	E.	S. E.	S. W.	S.	S.	S. W.
Weather.....	Clear.	Clear.	Cl'dy.	Clear.	Clear.	Clear.	Clear.
Depth Rain.....							T. & L. 3-10
Thermometer.							
Minimum.....	55°	55°	61°	66°	55°	59°	58°
At 8 A. M.....	58	59	65	66	63	64	66
At 12 M.....	66	69	69	71	74	74	77
At 3 P. M.....	69	71	72	73	73	76	78
Mean.....	62.	63.50	66.75	69.	66.75	68.	69.75
Barometer.							
At 12 M.....	30.2	30.2	29.9	30.	30.1	30.	29.8

Germantown, Pa.

B. J. LEEDON.

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OF  
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